

9/30/09

Tony Ellis
Case Development Officer
U.S. Environmental Protection Agency
Office of Civil Enforcement (Room 5041A, Mail code 2249A)
Waste and Chemical Enforcement Division
1200 Pennsylvania Ave., NW
Washington DC 20460

Re: Subpoena pursuant to section 11 of the Toxic Substances Control Act

Dear Mr. Ellis

Dover Chemical is hereby submitting for your review answers to questions 1,4,5 and 6 relevant to the subpoena issued by your office September 17, 2009 and received September 22, 2009. Questions 2 and 3 were granted a two week extension by Mark Garvey, USEPA, in order to compile all pertinent information. Those answers will be provided prior to the extension deadline, October 16, 2009. Answers to the remaining questions under this subpoena will be answered under the same format as received and as attachments, as appropriate. A table identifying enclosed attachments is also included.

Respectfully,

Dwain S. Colvin

President

Dover Chemical Corporation

3676 Davis Road NW

Dover, Ohio 44622



Question 1:

- o For the chemical substance, CAS Registry Number (CASRN) 61788-76-9 and 63449-39-8, reported for the 2006 Inventory Update Rule ("IUR"), and for chemical substance, CAS Category Code N583 reported in the Toxic Release Inventory ("TRI") Program, please identify each facility owned or operated by Dover Chemical Corporation that is currently manufacturing, processing, and/or importing these chemicals. For each facility please provide:
 - o The name of the facility and the name of its owner and/or operator; and
 - o The address of the facility

Answer:

- Dover Chemical Corporation (operator) 3676 Davis Road NW Dover, Ohio 44622
- ICC Industries, INC. (owner)
 460 Park Avenue
 New York, New York 10022
- Dover Chemical Corporation Hammond Works (operator)
 3000 Sheffield Ave.
 Hammond, Indiana 46327-1099
- ICC Industries, INC. (owner)
 460 Park Avenue
 New York, New York 10022



Question 4:

o Provide a copy of your 2006 Inventory Update Rule ("IUR") submission for these chemicals or an explanation why such a report was not required.

Answer:

o Reference attachment DCC-01 and DCC-02

Question 5:

 Provide a copy of the 2005, 2006, 2007, and 2008 Form R under the Toxic Release Inventory § 313 of the Emergency Planning and Community Right-to-Know Act (EPCRA) for these chemicals or an explanation why such reports were not required.

Answer:

o Reference attachment DCC-03 thru DCC-010

Question 6:

O Have you obtained information that could reasonably support the conclusion that a substance or mixture you manufacture, process, or import presents a substantial risk of injury to human health or the environment?

Answer:

O There is an enormous amount of information available on chlorinated paraffin. Several Risk Assessments have been completed and while there is some risk associated with the material there is no exposure at the level of risk that would warrant a conclusion of substantial risk to human health or the environment. TSCA 8 (e) notices are on record.



Identification of Attachments pursuant to Response Letter

DCC-01	Dover Chemical 2006 IUR
DCC-02	Dover Chemical-Hammond Works 2006
	IUR
DCC-03	Dover Chemical 2005 TRI-Form A
DCC-04	Dover Chemical 2006 TRI-Form A
DCC-05	Dover Chemical 2007 TRI-Form A
DCC-06	Dover Chemical 2008 TRI-Form A
DCC-07	Dover Chemical-Hammond Works 2005-
	Form R
DCC-08	Dover Chemical-Hammond Works 2006-
	Form R
DCC-09	Dover Chemical-Hammond Works 2007-
	Form R
DCC-010	Dover Chemical-Hammond Works 2008-
	Electronic email verifying "Polychlorinated
	alkanes-N583" not reported on Form R

PAGE 1 of 47

(IMPORTANT: Type only, read instructions before completing form)



U.S. Environmental Protection Agency Washington, DC 20460 Partial Updating of TSCA Inventory Data Base Site Report

(Section 8(a) Toxic Substances Control Act, 15 U.S.C. 2607(a))

PAGE 1 of ____

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Report Number

Mark "X" here if this is a revision to the previous report

Company Report No.: DOVIUR06

CERTIFICATION

Certification Statement: I hereby certify to the best of my knowledge and belief that Parts I and II have been completed in compliance with the requirements of 40 CFR 710.52(c)(1), (2), and (3); Part III of this form has been completed in compliance with the requirements of 40 CFR 710.52(c)(4); and any confidentiality claims are true and correct as to that information for which they have been asserted.

Signature

Date signed

Date signed

Official Title

VP Environmental Affairs

PART I. SITE IDENTIFICATION INFORMATION

		SECTION A. COMPANY INFORMATION*
1.A.1	Company Name	Dover Chemical Corporation
1.A.2	Company Dun & Bradstreet Number	004210563

	SECTION B. SITE INFORMATION*										
1.B.1	Site Name		Dover Chemical Corporation	1							
1.B.2	Site Dun &	Bradstreet Number	004210563		EPA Facility Identification Number	For EPA Use Only Leave Blank					
1.B.3	Street Add	ress (Line 1)	3676 Davis Road NW								
1.B.4	Street Addi	ress (Line 2)				•					
1.B.5	City	Dover		1.B.6	6 County / Parish	Tuscarawas					
1.B.7	State		ОН	1.B.8	Zip code	44622					

	SECTION C. TECHNICAL CONTACT INFORMATION*										
1.C.1	Name Mr. David L. Rankin				n			Telephone	330-365-3604		
1.C.3	C.3 Email Address dave.rankin@dovero			chem.co	m						
1.C.4	Mailing /	Address (Line 1)	P.O. Box 40								
1.C.5	.5 Mailing Address (Line 2)										
1.C.6	City	Dover		1.C.7	State	ОН	1.C.8	Zip Code	44622-0040		

^{*} Confidentiality claims for information in Part I, Sections A, B, and C, are made, as necessary, for each chemical substance on subsequent pages EPA Form Number <7740-8> (Rev 06/07/06) - Previous editions are obsolete Form Approved OMB Number: 2070-0162 (expiration May 2009)

Page		of	
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	SE	CTION A. CHEMICAL IDENTIFICATION		CBI⁺	
2.A.1	Chemical Identifying Number	108171-26-2	2.A.2	ID Code	С
2.A.3	Chemical Name	Alkanes, C10-12, Chloro			

		SECTION B. MAN	UFACT	JRING INF	ORMATION				
			CBI			a. Physic	a. Physical Form		ent of ction
2.B.1	Company Information							Volume in	n Each
2.B.2	Site Information							Physical	Form
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	X Manufacture		2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	161800		2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	X	}	100	

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SECTION A. INDUSTRIAL PROCESSING AND USE DATA a. Type of Process or Use Scote Code CBI Code CBI Percent CBI Code CBI Code CBI Code CBI Percent CBI										X	
				3 /					e Number of Sites		f Number of Workers	
	Code	СВІ	Code	CBI	Code	СВІ	Percent	СВІ	Code	CBI	Code	CBI
3.A.1												
3.A.2												
3.A.3										<u></u>		
3.A.4					I					<u> </u>		
3.A.5								<u> </u>		ļ		
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10												

	SECTION	N B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Χ
	a Commercial and Consumer Product Category		b. Used in Products Intended for Children		c Percent Production Volume associated with each category		d Maximum Concentration associated with each categorial	
	Code	CBI	Y/N/NRO	CBI	Percent	CBI	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10								

Page		of _	_
FOR	EPA	USE	ONLY

	SECTION A. CHEMICAL IDENTIFICATION							
2.A.1	Chemical Identifying Number	63449-39-8	2.A.2	ID Code	С			
2.A.3 Chemical Name Paraffin waxes and Hydrocarbon waxes, chloro								

		SECTION B. MAN	UFACT	JRING INF	ORMATION						
				CBI				a. Physical Form		b. Perce Produc	
2.B.1	Company Information							Volume in	n Each		
2.B.2	Site Information							Physical	Form		
2.B.3	Technical Contact Information				Check All That Apply	СВІ	Percent	СВІ			
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder	X		40			
2.B.5	Activity (Check all that apply)	X Manufacture ☐ Import		2.B.11	Pellets or Large Crystals						
2.B.6	Manufactured Production Volume (LB)	35437700		2.B.12	Water or Solvent Wet Solid						
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid						
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor						
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	Х		60			

PART III. PROCESSING AND USE INFORMATION

Complete Part III. Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	CTION A.	INDUSTRI	AL PRO	CESSING A	ND USE	DATA		N/A	\		
	a Type of P Use		b (5-digit) Cod		c Industrial Categ		d Percent Pro Volum		e Numb Sites		f Num Work	
	Code	СВІ	Code	CBI	Code	СВІ	Percent	СВІ	Code	СВІ	Code	СВІ
3.A.1	PF		32419		U17		60		S5		W7	
3.A.2	PF		32622		U12		40		S4		W6	
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10												

	SECTION	B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Χ	
	a Commercial a Product C		b. Used in F Intended for		c. Percent Prod associated with		d. Maximum Concentration associated with each categor		
	Code	CBI	Y/N/NRO	CBI	Percent	CBI	Code	CBI	
3.B.1									
3.B.2	A CAMPERAL CO.								
3.B.3	11 1100								
3.B.4									
3.B.5									
3.B.6									
3.B.7				•					
3.B.8									
3.B.9									
3.B.10									

Page	of
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	SE	CTION A. CHEMICAL IDENTIFICATION		CBI⁴	
2.A.1	Chemical Identifying Number	61788-76-9	2.A.2	ID Code	С
2.A.3	Chemical Name	Alkanes, chloro			

		SECTION B. MANU	JFACT	JRING INF	ORMATION				
			CBI			a. Physic	al Form	b. Perce Produc	
2.B.1	Company Information							Volume in	n Each
2.B.2	Site Information			1				Physical	Form
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	X Manufacture		2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	3703200		2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	Х		100	

PART III. PROCESSING AND USE INFORMATION

Complete Part III. Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	TION A.	INDUSTRI	AL PRO	CESSING A	ND USE	DATA		N/A			
	a Type of P Use		b (5-digit) Cod		c Industrial Categ		d Percent Pro Volum		e Numb Sites		f Numi Work	
	Code	CBI	Code	CBI	Code	CBI	Percent	CBI	Code	CBI	Code	CBI
3.A.1	PF		32419		U17		50		S3		W5	
3.A.2	PF		32622		U12		50		S3		W4	
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10												

	SECTION	B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Х
	a Commercial Product (b Used in I Intended for			c Percent Production Volume associated with each category		Concentration h each category
	Code	CBI	Y/N/NRO	СВІ	Percent	СВІ	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								ALLE, MATERIAL PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS OF THE PAR
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10								

Page	of	
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SE	ECTION A. CHEMICAL IDENTIFICATION		CBI ¹	
2.A.1 Chemical Identifying Number	68527-02-6	2.A.2	ID Code	С
2.A.3 Chemical Name	Alkenes. C12-24, chloro			

2.B.1 2.B.2	Company Information Site Information		СВІ			a. Physic	al Form	b. Perce Produc Volume in	tion n Each
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	X Manufacture		2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	4572300		2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	Х		100	

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	TION A.	INDUSTRI	AL PRO	CESSING A	ND USE	DATA		N/A			
	a Type of P		b (5-digit) Cod		c Industrial Categ		d Percent Production Volume		e Number of Sites		f. Num Worl	
	Code	СВІ	Code	СВІ	Code	CBI	Percent	СВІ	Code	CBI	Code	СВІ
3.A.1	PF		32622		U12		70		S1		W3	
3.A.2	PF		32419		U17		30		S3		W4	
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												ļ
3.A.8					<u> </u>							ļ
3.A.9												ļ
3.A.10												

	SECTION	B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Χ
	a Commercial Product (b Used in Products Intended for Children		uction Volume each category	d. Maximum Concentration associated with each categor	
	Code	CBI	Y/N/NRO	CBI	Percent	СВІ	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10	-							

Page _	of	
FOR E	PA USE ONLY	,
		- 1

	SE	CTION A. CHEMICAL IDENTIFICATION		CBI⁴	:
2.A.1	Chemical Identifying Number	68410-99-1	2.A.2	ID Code	С
2.A.3	Chemical Name	Alkenes, polymd., chlorinated			

2.B.1	Company Information		CBI			a. Physic	al Form	b. Perce Produc Volume in	ction	
2.B.2	Site Information		<u> </u>	1			Physica		l Form	
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ	
2.B.4	Site Limited (Y/N)	N	1	2.B.10	Dry Powder					
2.B.5	Activity (Check all that apply)	X Manufacture		2.B.11	Pellets or Large Crystals					
2.B.6	Manufactured Production Volume (LB)	6358700		2.B.12	Water or Solvent Wet Solid					
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid					
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor					
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	Х		100		

PART III. PROCESSING AND USE INFORMATION

B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	CTION A.	INDUSTRI	AL PRO	CESSING A	ND USE	DATA		N/A			
	a Type of P Use		b (5-digit) Cod		c. Industrial Categ		d Percent Pro Volum		e Numb Sites		f Num Worl	
	Code	СВІ	Code	CBI	Code	CBI	Percent	CBI	Code	CBI	Code	CBI
3.A.1	PF		32419		U17		100		S3		W5	
3.A.2											<u> </u>	
3.A.3										1		
3.A.4	<u> </u>									ļ	ļ	
3.A.5												
3.A.6											1	
3.A.7										<u></u>		
3.A.8												
3.A.9												
3.A.10												l

	SECTION	B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Χ
	a Commercial and Consumer Product Category			b. Used in Products Intended for Children		luction Volume each category	d. Maximum Concentration associated with each category	
	Code	СВІ	Y/N/NRO	СВІ	Percent	CBI	Code	CBI
3.B.1								
3.B.2						-		
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10								

ATTACHMENT: DCC-02

(IMPORTANT: Type only, read instructions before completing form)

\$EPA FORM 2006

U.S. Environmental Protection Agency Washington, DC 20460
Partial Updating of TSCA Inventory Data Base Site Report (Section 8(a) Toxic Substances Control Act, 15 U.S.C. 2607(a))

FOR EPA USE ONLY Report Number Mark "X" here if this is a revision to the previous report

PAGE 1 of ____

Company Report No.: HAMIUR06

CERTIFICATION

Certification State	ement: I hereby certify to the best of my kn	owledge and beli	ef that Parts I and II have been completed in						
	compliance with the requirements of 40 CFR 710.52(c)(1), (2), and (3); Part III of this form has been completed in compliance								
with the requirem	ents of 40 CFR 710.52(c)(4); and any confid	entiality claims a	re true and correct as to that information for						
which they have b	peen asserted.								
Signature	Hewil I Karke	Date signed	1 March 2007						
Name (printed)	David L. Rankin	Official Title	VP Environmental Affairs						

PART I. SITE IDENTIFICATION INFORMATION

	SECTION A. COMPANY INFORMATION*						
1.A.1	Company Name	Keil Chemical Corporation					
1.A.2	Company Dun & Bradstreet Number	131221660					

	SECTION B. SITE INFORMATION*									
1.B.1	Site Name	е	Keil Chemical Corpora	Keil Chemical Corporation						
1.B.2	Site Dun & Bradstreet Number 13122166		131221660		EPA Fa	cility Identification Number	For EPA Use Only Leave Blank			
1.B.3	Street Ad	dress (Line 1)	3000 Sheffield Avenue							
1.B.4	Street Ad	dress (Line 2)								
1.B.5	City	Hammond		1.B.	6	County / Parish	Lake			
1.B.7	State		IN	1.B.	8	Zip code	46327			

	SECTION C. TECHNICAL CONTACT INFORMATION*									
1.C.1	Name		Mr. David L. Rankir	Mr. David L. Rankin			Telephone	330-365-3604		
1.C.3	Email A	ddress	dave.rankin@dovero	dave.rankin@doverchem.com						
1.C.4	Mailing	Address (Line 1)	P.O. Box 40							
1.C.5	Mailing	Address (Line 2)								
1.C.6	City	Dover		1.C.7 State	ОН	1.C.8	Zip Code	44622-0040		

^{*} Confidentiality claims for information in Part I, Sections A, B, and C, are made, as necessary, for each chemical substance on subsequent pages EPA Form Number <7740-8> (Rev 06/07/06) - Previous editions are obsolete Form Approved OMB Number: 2070-0162 (expiration May 2009)

	Page		of		
r	FOR	EPA	USE	ONLY	1
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SE	CTION A. CHEMICAL IDENTIFICATION		CBI	
2.A.1 Chemical Identifying Number	61788-76-9	2.A.2	ID Code	С
2.A.3 Chemical Name	Alkanes, chloro			

		SECTION B. MANU	FACTL	RING INFO	ORMATION				
			СВІ			a Physic	al Form	b. Perce Produc	
2.B.1	Company Information							Volume ii	n Each
2.B.2	Site Information]				Physical	Form
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	Manufacture Import		2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	2133400		2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	X		100	

PART III. PROCESSING AND USE INFORMATION

Complete Part III. Sections A and B if the sum of the production volumes noted in Blocks 2 B 6 and 2 B 7 is 300,000 pounds or more

	SEC	TION A.	INDUSTRI	AL PRO	CESSING A	ND USE	DATA		N/A			
-	a Type of Process or Use		b (5-digit) NAICS Code		c. Industrial Function Category		d Percent Production Volume		e Number of Sites		f Num Work	
	Code	CBI	Code	CBI	Code	СВІ	Percent	CBI	Code	CBI	Code	СВІ
3.A.1	PF		32419		U17		50		S2		W4	
3.A.2	PF		32622		U12		50		S1		W1	
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10											T	

	SECTION	N B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Χ
		a Commercial and Consumer Product Category		b Used in Products Intended for Children		duction Volume each category	d. Maximum Concentration associated with each catego	
	Code	CBI	Y/N/NRO	CBI	Percent	CBI	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								-
3.B.10								

Page		of	_	
FOR	EPA	USE	ONLY	_
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	SECTION A. CHEMICAL IDENTIFICATION								
2.A.	2.A.1 Chemical Identifying Number 68527-02-6 2.A.2 ID Co								
2.A.3 Chemical Name Alkenes, C12-24, chloro									

		SECTION B. MAN	UFACT	JRING INF	ORMATION				
			CBI			a. Physic	al Form	b. Perce Produc	
2.B.1	Company Information			1				Volume in	n Each
2.B.2	Site Information			1				Physical	Form
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	X Manufacture		2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	736100		2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid				
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	X		100	

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	TION A.	INDUSTRI	AL PROC	CESSING A	ND USE	DATA		N/A	١		
-	a Type of Process or Use		b (5-digit) NAICS Code		c. Industrial Function Category		d Percent Production Volume		e. Number of Sites		f Num Work	
	Code	CBI	Code	СВІ	Code	СВІ	Percent	CBI	Code	СВІ	Code	CBI
3.A.1	PF		32419		U17		100		S1		W2	
3.A.2												
3.A.3												
3.A.4												
3.A.5												
3.A.6	I											
3.A.7												
3.A.8												
3.A.9												
3.A.10												

	SECTION	N B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	X
		a Commercial and Consumer Product Category		b. Used in Products Intended for Children		c Percent Production Volume associated with each category		Concentration h each category
	Code	CBI	Y/N/NRO	CBI	Percent	CBI	Code	CBI
3.B.1		-						
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10		1.00.0-0-2.00						

Page	of	
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	SECTION A. CHEMICAL IDENTIFICATION							
2.A.1	Chemical Identifying Number	63449-39-8	2.A.2	ID Code	С			
2.A.3	Chemical Name	Paraffin waxes and Hydrocarbon waxes, chloro						

		SECTION B. MAN	UFACT	JRING INF	ORMATION				
			CBI			a. Physica	al Form	b. Perce Produc	
2.B.1	Company Information							Volume in	n Each
2.B.2	Site Information			1				Physical	Form
2.B.3	Technical Contact Information	MARKET ST.				Check All That Apply	СВІ	Percent	СВІ
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder				
2.B.5	Activity (Check all that apply)	Manufacture Import		2.B.11	Pellets or Large Crystals				
2.B.6	Manufactured Production Volume (LB)	3393900		2.B.12	Water or Solvent Wet Solid				
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid	-			
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor				
2.B.9	Maximum Concentration (code)	M3		2.B.15	Liquid	X		100	

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	TION A.	INDUSTRI	AL PRO	CESSING A	ND USE	DATA		N/A	١		
		a Type of Process or Use		b (5-digit) NAICS Code		c Industrial Function Category		oduction e	e. Number of Sites		f. Numl Work	
	Code	CBI	Code	CBI	Code	СВІ	Percent	СВІ	Code	СВІ	Code	CBI
3.A.1	PF		32419		U17		60		S2		W3	
3.A.2	PF		32622		U12		40		S1		W1	
3.A.3												
3.A.4												
3.A.5												
3.A.6												
3.A.7												
3.A.8												
3.A.9												
3.A.10												

	SECTION	B. COMMER	CIAL AND CONS	UMER USE	DATA		N/A	Χ
	a. Commercial Product (b. Used in Products Intended for Children		c. Percent Production Volume associated with each category		d Maximum Concentration associated with each categor	
	Code	CBI	Y/N/NRO	СВІ	Percent	CBI	Code	CBI
3.B.1								
3.B.2								
3.B.3								
3.B.4								
3.B.5								
3.B.6								
3.B.7								
3.B.8								
3.B.9								
3.B.10								

Page	of	_	
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			1

SE	ECTION A. CHEMICAL IDENTIFICATION		CBI	
2.A.1 Chemical Identifying Number	68410-99-1	2.A.2	ID Code	С
2.A.3 Chemical Name	Alkenes, polymd., chlorinated			

		SECTION B. MAN	UFACTL	RING INF	ORMATION					
2.B.1	Company Information		CBI			a. Physic	al Form	b. Perce Produc Volume in	ction	
	, , ,			1				volume ti	n Each	
2.B.2	Site Information							Physical	Physical Form	
2.B.3	Technical Contact Information					Check All That Apply	СВІ	Percent	СВІ	
2.B.4	Site Limited (Y/N)	N		2.B.10	Dry Powder					
2.B.5	Activity (Check all that apply)	X Manufacture		2.B.11	Pellets or Large Crystals					
2.B.6	Manufactured Production Volume (LB)	894400		2.B.12	Water or Solvent Wet Solid					
2.B.7	Imported Production Volume (LB)	0		2.B.13	Other Solid					
2.B.8	Number of Workers (code)	W1		2.B.14	Gas or Vapor					
2.B.9	Maximum Concentration (code)	M5		2.B.15	Liquid	X		100		

PART III. PROCESSING AND USE INFORMATION

Complete Part III, Sections A and B if the sum of the production volumes noted in Blocks 2.B.6 and 2.B.7 is 300,000 pounds or more.

	SEC	TION A.	INDUSTRI	AL PROC	CESSING A	ND USE	DATA		N/A				
	a Type of Process or Use		b (5-digit) NAICS Code		c Industrial Function Category		d Percent Production Volume		e Number of Sites			mber of rkers	
	Code	СВІ	Code	СВІ	Code	CBI	Percent	СВІ	Code	СВІ	Code	CBI	
3.A.1	PF		32622		U12		100		S1		W1		
3.A.2													
3.A.3													
3.A.4													
3.A.5													
3.A.6													
3.A.7													
3.A.8													
3.A.9													
3.A.10													

	SECTION		N/A	X					
	a Commercial and Consumer Product Category		b Used in Products Intended for Children		c. Percent Prod associated with		d. Maximum Concentration associated with each category		
	Code	CBI	Y/N/NRO	CBI	Percent	СВІ	Code	CBI	
3.B.1									
3.B.2									
3.B.3									
3.B.4									
3.B.5									
3.B.6									
3.B.7									
3.B.8									
3.B.9									
3.B.10									

Signature Certification for U.S. EPA Diskette Submission

DISK

DOVER CHEMICAL CORPORATION P.O. BOX 40 DOVER, OH 446220040 44622DVRCHWESTF



June 28, 2006

TRI Data Processing Center c/o Computer Sciences Corportation Suite 300 8400 Corporate Drive Landover, MD 20785

(301) 429-5005

To Whom It May Concern:

Enclosed please find one (1) microcomputer diskette containing toxic chemical release reporting information for:

DOVER CHEMICAL CORPORATION

This information is submitted as required under section 313 of the Emergency Planning and Community Right-to-Know Act of 1986 and the Pollution Prevention Act of 1990.

We are submitting a total of 11 chemical report(s) for our facility.

These 11 chemical report(s) are described below:

TRI Chemical or Chemical Category 4,4'-Isopropylidenediphenol Bromine Carbon tetrachloride Certain Glycol Ethers Chlorine Chloroform Hydrochloric acid (1995 and after "Acid Aerosols" only)	Reporting Year 2005 2005 2005 2005 2005 2005 2005 200	CAS Number 80-05-7 7726-95-6 56-23-5 N230 7782-50-5 67-66-3 7647-01-0	Report Form A Form R Form R Form R Form R Form R Form R
Phenol Polychlorinated alkanes Xylene (mixed isomers) Zinc Compounds	2005	108-95-2	Form R
	2005	N583	Form A
	2005	1330-20-7	Form R
	2005	N982	Form R

Our technical point of contact is

DAVID L. RANKIN (330) 365-3604

DAVE RANKIN@DOVERCHEM.COM

and is available should any questions or problems arise in the processing of this diskette.

If the enclosed diskette contains one or more Form R chemicals, then I hereby certify that I have reviewed the enclosed documents and that, to the best of my knowledge and belief, the submitted information is true and complete and that the amounts and values in this report(s) are accurate based on reasonable estimates using data available to the preparers of this report(s).

If the enclosed diskette contains one or more Form A chemicals, then I hereby certify that to the best of my knowledge and belief, for each toxic chemical listed in the Form A statement, the annual reportable amount as defined in 40 CFR 372.27(a) did not exceed 500 pounds for this reporting year and that the chemical was reporting vear.

IMPO	RTAN'ı: Type or print; read instr	ructions before completing form)		Form Approved OMB Number: 2070-0143 Approval Expires: 1/31/2008 Page 1 of 2				
E	States OD Environmental Protecti	Agency Dy CHAV	OF S	ub	mi	t to	E	PA
WHE	RE TO SEND COMPLETED FOI	RMS: 1. TRI Data Processing Center P.O.Box 1513 Lanham, MD 20703-1513	2. APPROPRIATE (See instructions	(F) -	Enter "X" here is a revision For EPA use of			
lmp	ortant: See instruction	s to determine when "Not	Applicable (N	A)" boxe	s shou	ld be ched	cked.	
		PART I. FACILITY IDENT	IFICATION IN	NFORMA	ATION			
SEC	CTION 1. REPORTING YE	EAR <u>2005</u>						
SEC	TION 2. TRADE SECRE	T INFORMATION						
2.1	Are you claiming the toxic chem Yes (Answer question 2 Attach substantiation			Is this copy (Answer onl	y if "YES" i	Sanitized	U	Insanitized
SEC	TION 3. CERTIFICATION	l (Important: Read and sign a	fter completing	all form	sections	.)		
amou	unt as defined in 40 CFR 372.27	knowledge and belief, for each toxic ch (a), did not exceed 500 pounds for this se used in an amount not exceeding 1	reporting year and	that the cher	nical was	eportable		
	and official title of owner/operat L. Rankin VP Environmental Af	or or senior management official: fairs		Signati	aft - I	Do No	ot S	Date Signed:
SEC	TION 4. FACILITY IDENT	TIFICATION						
4.1			TRI Facility ID I	Number 4	14622DVR	CHWESTF		
Facility	or Establishment Name		Facility or Establish			dress (if different	from stree	et address)
Dover Street	Chemical Corporation		Dover Chemical Mailing Addres	Corporation				
	.⊒ Davis Road		P.O. Box 40	l				
City/Co	unty/State/Zip Code		City/State/Zip Cod	de			(Country (Non-US)
Dover	Tuscara	awas OH 44622	Dover			OH 4462	2-0040	
4.2	This report contains informati	on for: (Important : check c or d if a	applicable)		c.	A Federa facility	d.	GOCO
4.3	Technical Contact Name	David L. Rankin				hone Number 365-3604	(include	area code)
	Email Address	dave.rankin@doverchem.com						
4.4	Intentionally left blank							

EPA Form 9350-2 (Rev. 1/2006) - Previous editions are obsolete.

SECTION 5. PARENT COMPANY INFORMATION

Parent Company's Dun & Bradstreet Number

4.5

4.7

SIC Code (s) (4 digits)

Dun & Bradstreet

5.1 Name of Parent Company

Number(s) (9 digits)

Primary

b. 2899

ICC Industries Inc.

NA

a. 2869

a. 004210563

Printed using TRI-ME RY2005 6.1.8

046177341

c. 2819

d.

6/28/2006 03:27 PM

FILE COPY -- PARTY CHEM ON PHYLICS ON DENIEN BY THE TOP OF THE PARTY CHEMICALS INCIDENT AND DIOXIN-LIKE COMPOUNDS:

SECTIO	ON 1. TOXIC CHEMICAL IDENTITY	Report 1	of	4
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.	egory.)		
1.1	80-05-7			
	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)			
1.2	4,4'-Isopropylidenediphenol			
4.2	Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive).			
1.3	NA NA			
SECTION	ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete	d Section 1	lab	ove.)
2.4	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)			
2.1	NA NA			
SECTIO	ON 1. TOXIC CHEMICAL IDENTITY	Report 2	of	4
	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate			
1.1	7726-95-6			
4.0	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)			
1.2	Bromine			
1 2	Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive).			
1.3	NA NA			
SECTIO	ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete	d Section 1	abo	ove.)
2.1	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)			
٤. ١	NA NA			
SECTIO	ON 1. TOXIC CHEMICAL IDENTITY	Report 3	of	4
	ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical call	<u> </u>	of	4
SECTION 1.1		<u> </u>	of	4
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical call	<u> </u>	of	4
	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cal N230	<u> </u>	of	4
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)	<u> </u>	of	4
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cal N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers	<u> </u>	of	4
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive).	legory.)		
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA	legory.)		
1.1	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes" Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete	legory.)		
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)	legory.)	1 abo	
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA	ed Section	1 abo	ove.)
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY	ed Section	1 abo	ove.)
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)	ed Section	1 abo	ove.)
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.)	ed Section	1 abo	ove.)
1.1 1.2 1.3 SECTIO 2.1 SECTIO 1.1 1.2	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical can N583 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)	ed Section	1 abo	ove.)
1.1 1.2 1.3 SECTIO	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical can N583 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Polychlorinated alkanes	ed Section	1 abo	ove.)
1.1 1.2 1.3 SECTIO 2.1 SECTIO 1.1 1.2 1.3	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N583 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Polychlorinated alkanes Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive).	Report 4	of	ove.)
1.1 1.2 1.3 SECTIO 2.1 SECTIO 1.1 1.2 1.3	CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical cate N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA ON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you complete Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) NA ON 1. TOXIC CHEMICAL IDENTITY CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) Polychlorinated alkanes Generic Chemical Name (Important: Complete only if Part I. Section 2.1 is checked "yes". Generic Name must be structurally descriptive). NA	Report 4	of	ove.)

^{*} See the TRI Reporting Forms and Instructions Manual for the list of PBT Chemicals (including Dioxin and Dioxin-like Compounds)
EPA Form 9350-2 (Rev. 1/2006) - Previous editions are obsolete. (Make additional copies of this page, if needed)

10 5 2016 Down Formy

The submission has been CERTIFIED and SENT TO EPA.

Attachment BCC-04

 Status
 Date
 Time

 [X] Prepared
 7/2/2007
 4:25:57 PM

 [X] Certified
 7/2/2007
 4:31:43 PM

 [X] Sent to EPA
 7/2/2007
 4:31:43 PM

 [] Cancelled

Reference number: Preparer Email: Certifying Official: Title:

TRI000120070702162557MALGUARM maria.malguarnera@rmtinc.com PATRICK HUTH FH&S MANAGER

EH&S MANAGER phuth@doverchem.com

State Data Exchange State:

Ohio

TRI Facility ID: Facility:

E-mail:

44622DVRCHWESTF

DOVER CHEMICAL CORPORATION

3676 DAVIS ROAD Dover, OH 44622

TRI Chemical or Category	CAS	FORM	RY	Revision
4,4'-lsopropylidenediphenol	80057	Α	2006	No
<u>Bromine</u>	7726956	Α	2006	No
Carbon tetrachloride	56235	R	2006	No
Certain Glycol Ethers	N230	Α	2006	No
<u>Chlorine</u>	7782505	R	2006	No
<u>Chloroform</u>	67663	R	2006	No
Hydrochloric acid (1995 and after "Acid Aerosols" only)	7647010	R	2006	No
Phenol	108952	R	2006	No
Polychlorinated alkanes	N583	Α	2006	No
Xylene (mixed isomers)	1330207	R	2006	No
Zinc Compounds	N982	R	2006	No

No further action is needed on your part. In order to exit, click the "X" in the upper right-hand corner of this screen.

Form Approved OMB Number: 2070-0143

Approval Expires: 1/31/2008 Page 1 of 2

9	United States Environmental F	rotect	ion Agency	TOXIC CHENTO	FORM.		NVENT	ORY				
WHE	RE TO SEND COMPLE	TED FOR	P.O.Box 15		. APPROPRI. (See instruc				Enter "X" here is a revision For EPA use of			
lmp	ortant: See instr	uction	s to determine	when "Not A	pplicable	(NA)	" boxe	s shou	ld be chec	ked.		
			PART I. FACI	LITY IDENTII	FICATIO	N INF	ORM	ATION				
SE	CTION 1. REPORT	ING YI	EAR <u>2006</u>									
SE	CTION 2. TRADE	SECRE	T INFORMATIO	N								
2.1	Are you claiming the toxic chemical identified on page 2 trade secret? Yes (Answer question 2.2; Attach substantiation forms) NO (Do not answer 2.2; Go to Section 3) Is this copy Sanitized Unsanitized (Answer only if "YES" in 2.1)									itized		
SEC	TION 3. CERTIFIC	OITAC	l (Important: Re	ad and sign aft	er comple	ting a	ll form	section	s.)			
eport han 2 imoui Pursu itaten his re	ant to 40 CFR 372.27(a) ing year, the annual report, 1000 pounds of total distriction to 40 CFR 372.27(a) ment, there were zero districtions year, the "Annual d 500 pounds for this re	portable and posal or of n pounds of (2), "I he sposals of Reports	mount for each chemother releases to the studies during this reporting the reby certify that to the other releases to the able Amount of a Chemother releases to the release to the releases to the releases to the releases to the release to the releases to the release to the relea	ical, as defined in 40 environment, and the grear;" and/or e best of my knowled environment (incluemical of Special Co	OCFR 372.27 at the chemic dge and belied ding disposa ncern" for ea	7(a)(1), cal was ref for the ls or oth ch such	toxic che e release chemical	ceed 5,00 ured, or pr emical(s) o es that res l, as define	0 pounds, which cocessed, or oth of special concessulted from catased in 40 CFR 37	n includerwise In listed Strophic 2.27(a	led no used in d in this c event (2), die	more n an s ts) for d not
Name	and official title of owner	er/operato	or or senior managen	nent official:			Signatu	ıre:		1 (**	Dat	e Signed:
atric	k Huth EH&S Manager							11(**	JU NU		07/0	2/2007
SEC	TION 4. FACILITY	IDENT	TIFICATION									
1.1					TRI Facility				CHWESTF			
	or Establishment Name]							dress (if different f	rom stre	et addr	ess)
Oover Street	Chemical Corporation				Dover Cher Mailing Addr		рогацоп					
	→ Davis Road				P.O. Box 40							
ity/Co	unty/State/Zip Code				City/State/Zip	p Code					Countr	y (Non-US)
over		Tuscara	was	OH 44622	Dover				OH 44622	-0040		
4.2	This report contains i	nformatio	on for: (Important	: check c or d if app	olicable)			c	A Federal facility	d. [GOCO
1.3	Technical Contact Na	ime	Patrick Huth					-	hone Number (i) 280-6200	nclude	area o	ode)
	Email Address		phuth@doverchen	n.com								
1.4	Intentionally left blank											
1.5	NAICS Code (s) (6 dig	gits)	Primary a. 325998	b . 325199	c . 325188		d.		e.	f		
l.7	Dun & Bradstreet	a . 004	210563									
	Number(s) (9 digits)	b.										
SEC	TION 5. PARENT (COMPA	NY INFORMAT	ION								

Parent Company's Dun & Bradstreet Number

NA

Name of Parent Company

5.1

046177341

ICC Industries Inc.

NA

EFA FORM A

PART II. CHEMICAL ID INTIFICATION

TRIFID: 44622DVRCHWESTF Do not use this form for reporting Dioxin and Dioxin-like Compounds* SECTION 1. TOXIC CHEMICAL IDENTITY Report 1 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 80-05-7 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 4,4'-Isopropylidenediphenol Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 NA (Important: DO NOT complete this section if you completed Section 1 above.) SECTION 2. MIXTURE COMPONENT IDENTITY Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) 2.1 NA SECTION 1. TOXIC CHEMICAL IDENTITY Report 2 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 7726-95-6 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 **Bromine** Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 NA (Important: DO NOT complete this section if you completed Section 1 above.) SECTION 2. MIXTURE COMPONENT IDENTITY Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) 2.1 NA **SECTION 1. TOXIC CHEMICAL IDENTITY** Report 3 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 NA (Important: DO NOT complete this section if you completed Section 1 above.) SECTION 2. MIXTURE COMPONENT IDENTITY Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) 2.1 NA SECTION 1. TOXIC CHEMICAL IDENTITY Report 4 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 N583 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 Polychlorinated alkanes Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 NA (Important: DO NOT complete this section if you completed Section 1 above.) SECTION 2. MIXTURE COMPONENT IDENTITY Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

2.1

NA

The submission has been CERTIFIED and SENT TO EPA.

ATTACKONENT SEC-05

Status	Date	Time
[X] Prepared	7/1/2008	9:33:50 AM
[X] Certified	7/1/2008	9:55:39 AM
[X] Sent to EPA	7/1/2008	9:55:39 AM
[] Cancelled		

Reference number:
Preparer Email:
Certifying Official:

Title: E-mail: TRI000120080701093350BLANKESM

michael.blankestyn@rmtinc.com

TOM FREEMAN

VICE PRESIDENT OF OPERATIONS

tfreeman@doverchem.com

State Data Exchange State:

Ohio

TRI Facility ID:

Facility:

44622DVRCHWESTF

DOVER CHEMICAL CORPORATION

3676 DAVIS ROAD Dover, OH 44622

TRI Chemical or Category	CAS	FORM	RY	Revision	Withdrawal
4,4'-isopropylidenediphenol	80057	Α	2007	No	No
Bromine	7726956	Α	2007	No	No
Carbon tetrachloride	56235	R	2007	No	No
Certain Glycol Ethers	N230	Α	2007	No	No
Chlorine	7782505	R	2007	No	No
Chloroform	67663	R	2007	No	No
Hydrochloric acid (1995 and after "Acid Aerosols" only)	7647010	R	2007	No	No
Phenol	108952	R	2007	No	No
Polychlorinated alkanes	N583	Α	2007	No	No
Xylene (mixed isomers)	1330207	R	2007	No	No
Zinc Compounds	N982	R	2007	No	No

No further action is needed on your part. In order to exit, click the "X" in the upper right-hand corner of this screen.

(IMP	DRTANT: Type or print: read ins	tructions before cor	mpleting form)	Ap	proval Ex	pires: 3/31/20)11	P	Page 1 of 2
9	United States		TOXIC CHEN!	CALFEEEAS CORMA	SE INVE	NTORY	TRI Facility II		
	Environmental Protect	tion Agency		ronivi A			110225 11101		
WHE	RE TO SEND COMPLETED FO	P.O.Box		2. APPROPRIATI (See instruction					
revis	section only applies if you are sing or withdrawing a previous nitted form, otherwise leave b	sly	Revision (enter up t	o two code(s))		Withdra	iwal (enter up t	o two	code(s))
lmp	ortant: See instruction	ns to determi	ne when "Not A	Applicable (I	NA)" b	oxes shou	ıld be chec	ked.	
		PART I. FAC	CILITY IDENTII	FICATION I	NFOR	MATION			
SE	CTION 1. REPORTING Y	EAR <u>2007</u>							
SE	CTION 2. TRADE SECRE	T INFORMATI	ON						
2.1	Are you claiming the toxic cher Yes (Answer question 2 Attach substantiat	.2; X	page 2 trade secret? NO (Do not answer Go to Section 3		ls this c	opy	Sanitized in 2.1)		Unsanitized
SEC	TION 3. CERTIFICATION	N (Important: F	Read and sign aft	er completin	g all for	m sections	s.)		
reporti than 2 amour Pursua statem this re excee	ant to 40 CFR 372.27(a)(1), "I he ng year, the annual reportable a .000 pounds of total disposal or nt not exceeding 1 million pound ant to 40 CFR 372.27(a)(2), "I he nent, there were zero disposals of porting year, the "Annual Report d 500 pounds for this reporting yes during this reporting year."	amount for each che other releases to the s during this reporti ereby certify that to or other releases to table Amount of a C	emical, as defined in 4 ne environment, and th ng year;" and/or the best of my knowle the environment (inclu Chemical of Special Co	O CFR 372.27(a) at the chemical value of the	(1), did no was manu r the toxic or other rel such chen	t exceed 5,00 factured, or pr chemical(s) o eases that res nical, as define	0 pounds, which rocessed, or oth of special concersulted from catased in 40 CFR 37	includ erwise In liste strophi 2.27(a	ded no more e used in an ed in this ic events) for a)(2), did not
Name	and official title of owner/operat	or or senior manage	ement official:		Sidi	nature:	-		Date Signed:
Tom F	reeman Vice President of Oper	ations							<u>T</u> 06/50/2008
SEC	TION 4. FACILITY IDEN	TIFICATION			,				
4.1				TRI Facility ID	Number	44622DVR	CHWESTF		
Facility	or Establishment Name			Facility or Establis	hment Nam	e or Mailing Add	dress (if different fr	om stre	et address)
Dover	Chemical Corporation			Dover Chemica	l Corpora	tion			
Street 3676 [Mailing Address P.O. Box 40					
City/Cou	inty/State/Zip Code			City/State/Zip Co	de				Country (Non-US)
Dover	Tuscara	iwas	OH 44622	Dover			OH 44622-	0040	
4.2	This report contains informat	ion for: <u>(Importar</u>	nt : check c or d if ap	plicable)	C.	A Fe	deral facility	d. [GOCO
4.3	Technical Contact Name	Tom Freeman				<u> </u>	hone Number (ir 365-3697	nclude	area code)
	Email Address	tom.freeman@d	overchem.com			1 (3-5)	a		

SECTION 5. PARENT COMPANY INFORMATION

Public Contact Name

NAICS Code (s) (6 digits)

Email Address

Dun & Bradstreet

Number(s) (9 digits)

4.4

4.5

4.7

ICC Industries Inc. Name of Parent Company 5.1 NA

a. 004210563

Tom Freeman

Primary

a. 325998

tom.freeman@doverchem.com

b. 325199

Parent Company's Dun & Bradstreet Number NA 5.2 EPA Form 9350-2 (Rev. 01/2008) - Previous editions are obsolete.

Printed using TRI-ME RY2007 8.2.5

046177341

c. 325188

d.

Telephone Number (include area code)

ITA FORM A

PART II. CHEMIC ALIDENTIFICATION TRIFID: 44622DVRCHWESTF Do not use this form for reporting Dioxin and Dioxin-like Compounds* SECTION 1. TOXIC CHEMICAL IDENTITY Report 1 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 80-05-7 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 4,4'-Isopropylidenediphenol Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.) Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) 2.1 SECTION 1. TOXIC CHEMICAL IDENTITY of 4 Report 2 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 7726-95-6 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive) 1.3 SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.) Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) 2.1 NA **SECTION 1. TOXIC CHEMICAL IDENTITY** Report 3 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 N230 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 Certain Glycol Ethers Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.) Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.) 2.1 NA SECTION 1. TOXIC CHEMICAL IDENTITY Report 4 of 4 CAS Number (Important: Enter only one number exactly as it appears on the Section 313 list. Enter category code if reporting a chemical category.) 1.1 N583 Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.) 1.2 Polychlorinated alkanes Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive). 1.3 SECTION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.)

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

2.1

NA

^{*} See the TRI Reporting Forms and Instructions Manual for the TRI-listed Dioxin and Dioxin-like Compounds

ATTACHMENT Sec-06

Form Status: Available for Editing Validation Status: Passed with No Errors

Form Approved OMB Number:

(IMPC	DRTANT: Type o	or print; read instruc	tions before c	ompleting for	n) .	Appro	val Expires:		
Env	ed States ironmental tection ncy	то	XIC CHEN	MICAL REL FORM	EASE INVEN A	TOR	Υ	TRI Facility I	
WHI	ERE TO SEND OMPLETED FORMS:	1. TRI Data Proces P.O.Box 1513 Lanham, MD 2070 *** Draft Form On	3-1513	ubmit to EPA	**		2. APPROPRIA (See instruction		
revis	sing or withdra	applies if you are wing a previously	·	-					o two code(s))
		herwise leave bla actions to determine][]	n aboa	l	[][]	
ппро	mant. See mstru	ictions to determine			TIFICATION INFO				
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	-	SECRET INFORM				*********			The second secon
2.1 A secre	et? [] Yes (Ansv	the toxic chemical in wer question 2.2:Attonion answer 2.2; Go	ach substanti	ation forms)] Unsanitized if "YES" in 2.1)	A CANADA	
l here defin	eby certify that to ed in 40 CFR 37	FICATION (Important to the best of my known 72.27 (a), did not ex amount not exceed	owledge and l ceed 500 pou	oelief, for each unds for this re	toxic chemical lisporting year and	sted in the ch	the statement, I		
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44	Public	Contact name	Market Drain	i Tren	(Guali Address 화가 다유된 (대기	. 7.71		Talephone Numb	ger (grada 26 deser sade
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MPOR	TANT: Type or print; read instructions before completing form	
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l	PART II. CHEMICAL IDENTIFICATION	
L	Do not use this form for reporting Dioxin and Dioxin-like Compounds*	kg Lub Purmi di
SECTION	ON 1. TOXIC CHEMICAL IDENTITY	Report of
	CAS Number (Important: Enter only one number as it appears on the Section 313 list. Enter category code it	reporting a chemical category.)
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	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the S	ection 313 list.)
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	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name mu	ust be structurally descriptive).
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SECT	ION 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you co	empleted Section 1 above.)
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ECTIO	ON 1. TOXIC CHEMICAL IDENTITY	Report of
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	Toxic Chemical or Chemical Category Name (Important: Enter only one name exactly as it appears on the Section 313 list.)	
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	Generic Chemical Name (Important: Complete only if Part I, Section 2.1 is checked "yes". Generic Name must be structurally descriptive).	
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ECT	TON 2. MIXTURE COMPONENT IDENTITY (Important: DO NOT complete this section if you completed Section 1 above.))
	Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and pu	unctuation
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SECT	ION 2. MIXTURE COMPONENT IDENTITY (Important, DO NOT complete this section if you completed Section 1 above.)	W

Generic Chemical Name Provided by Supplier (Important: Maximum of 70 characters, including numbers, spaces, and punctuation.)

*See the TRI Reporting Forms and Instructions Manual for the TRI-listed Dioxin and Dioxin-like Compounds EPA Form 9350-2 (Rev. 03/2009) - Previous editions are obsolete.

MPOR	TANT: Type or print; read instructions before completing form	
	EPA FORM A PART II. CHEMICAL IDENTIFICATION	TRI Facility ID Number
	Do not use this form for reporting Dioxin and Dioxin-like Compounds*	AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA
SECTIO	ON 1. TOXIC CHEMICAL IDENTITY	Report of
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SECTION	ON 1. TOXIC CHEMICAL IDENTITY	Report 2 of .
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	CAS Number (Important: Enter only one number as it appears on the Section 313 list. Enter category code i	f reporting a chemical category.)
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*See the TRI Reporting Forms and Instructions Manual for the TRI-listed Dioxin and Dioxin-like Compounds EPA Form 9350-2 (Rev. 03/2009) - Previous editions are obsolete.

Irifid: 46320KLDVS3000S

Facility Name: DOVER CHEMICAL HAMMOND WORKS OPERATED BY KEIL

CHEMICAL

Reporting Year: 2005

Form R continued

Chemical Name: POLYCHLORINATED ALKANES

Facility Data Profile Date: 6/21/2006 FDP Notice No: FP06003213129

DCN: 13-05-203-34006-8 File Number: ES-06-00041027-6

8.0 *N	Source Reduction & Recycling Activities * Note: All values are in Pounds	Col. A Prior	Col. B Current	Col. C Following	Col. D Second Following
		Year	Year	Үеаг	Year
8.1a	Total on-site disposal to UIC Class I Weils, RCRA Subtitle C landfills and other landfills	NA	NA	NA	NA
8{b	Total other on-site disposal or other releases	255	255	255	255
8.1c	Total off-site disposal to UIC Class I Wells. RCRA Subtitle C landfills and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity Used For Energy Recovery On-Site	NA	NA	NA	NA
8.3	Quantity Used For Energy Recovery Off-Site	<u>1800</u>	NA	NA	<u>NA</u>
8.4	Quantity Recycled On-Site	<u>NA</u>	NA	NA	NA
8.5	Quantity Recycled Off-Site	NA	NA	NA	NA
8.6	Quantity Treated On-Site	NA	NA	NA	NA
87	Quantity Treated Off-Site	٤	í	5.	5
	Quantity Released as a Result of Remedial	NA.			
	Catastrophic or One Time Events Production Ratio or Activity Index	1			
8.10 S	Source Reduction Activities: Method A	Method B	}	Method C	
8101	<u>W25</u> <u>105</u>				

Irifid: 46320KLDVS3000S

Facility Name: DOVER CHEMICAL HAMMOND WORKS OPERATED BY KEIL

G/ - D - V

CHEMICAL

Reporting Year: 2005

Form R continued

Facility Data Profile Date: 6/21/2006 FDP Notice No . FP06003213129

DCN: 13-05-203-34006-8 File Number: ES-06-00041027-6

C 9/ 5---

Chemical Name: POLYCHLORINATED ALKANES

5.3 Discharges to Receiving Streams or Water Bodies Stream or water body name: 5.3.1 NA		A. Total Release	B. Basis of Estimate	C % from Stormwater
	Underground Injection/Land Disposal	A. Yotal Release	B. Basis of Estimate	
5 4 1	Underground Injection On-Site To Class I Wells	NA		
5.4.2	Underground Injection On-Site To Class II-V Wells	NA		
5.5.1A	RCRA Subtitle C Landfills	NA		
551B	Other Landfills	NA		
5.5.2	Land Treatment / Application Farming	NA		
55.3A	RCRA Subtitle C surface impoundments	NA		
5.5.3B	Other surface impoundments	NA		
5.5.4	Other Disposal	NA		

- 6.0 Transfers of the Toxic Chemical in Wastes to Off-site Locations
- 6.1 Discharges to Publicly Owned Treatment Works (POTWs)
- 6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers: A

6.1.A 2 Basis of Estimate: O-Other Approaches

6. I.B. 1

POTW NAME HAMMOND SANITARY DISTRICT

POTW Address: 5143 COLUMBIA AVENUE

City: HAMMOND County LAKE State: IN Zip: 46320

- 62 I ransfers to Other Off-site Locations
- 62.1 Off-Site EPA Identification Number (RCRA ID No): NA

Off-Site Location Name. NA

Off-site Address:

City: State. County: Province: Zip: Country:

Location under control of reporting facility or parent company:

A Total Transfers B. Basis of Estimate C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery

NA

- 7A On-Site Waste I reatment Methods & Efficiency
 - 7A.1 a General Waste Stream: NA
 - b Waste I reatment Method Sequence:
 - d Waste Treatment Efficiency:
- 7B Ou-site Energy Recovery Processes

1. NA

Irifid: 46320KL DVS3000S

Facility Name: DOVER CHEMICAL HAMMOND WORKS

Facility Data Profile Date: 6/28/2007 FDP Notice No: FP07003616606

DCN: 13-06-204-50394-0 File Number: ES-07-00069750-2

Reporting Year: 2006

Form R continued

Chemical Name: POLYCHLORINATED ALKANES

7C	On-site Recycling Processes 1. NA				was decided by Agreement and A
8.0	Source Reduction & Recycling Activities * *Note: All values are in Pounds	Col. A Prior Year	Col. B Current Year	Col. C Following Year	Col. D Second Following Year
813	I otal on-site disposal to UIC Class I Wells. RCRA Subtitle C landfills and other landfills	NA	NA	NA	NA
8.16	Total other on-site disposal or other releases	255	10	10	10
810	Total off-site disposal to UTC Class I Wells, RCRA Subtitle C landfills and other landfills	NΔ	NA	NA	NA
816	I Total other off-site disposal or other releases	NA	NA	NA	NA
8 2	Quantity Used For Energy Recovery On-Site	NA	NA	NA	<u>NA</u>
8.3	Quantity Used For Energy Recovery Off-Site	NA	NA	NA	NA
8.4	Quantity Recycled On-Site	NA	NA	NA	NA
8.5	Quantity Recycled Off-Site	NA	NA	NA	NΑ
86	Quantity Treated On-Site	NΑ	NA	NA	NΑ
8.7	Quantity Treated Off-Site	5	NA	NA	NA
8.8	Quantity Released as a Result of Remedial Catastrophic, or One Time Events	Q			
8.9	Production Ratio or Activity Index	1			

8 11 Additional Information Included. NO

1rifid: 46320KLDVS3000S

Facility Name: DOVER CHEMICAL HAMMOND WORKS

Facility Data Profile Date: 6/28/2007 FDP Notice No. FP07003616606

Reporting Year: 2006

Form R continued

DCN. 13-06-204-50394-0 File Number: ES-07-00069750-2

Chemical Name: POLYCHLORINATED ALKANES

5.3 Discharges to Receiving Streams or Water Bodies Stream or water body name: A. Total Release B. Basis of Estimate C. % from Stormwater

5.3.1 NA

	Underground Injection/L and Disposal	A. Total Release	B. Basis of Estimate	
5.4.1	Underground Injection On-Site To Class I Wells	<u>NA</u>		
5.4.2	Underground Injection On-Site To Class II-V Wells	NA		
5.5.1A	RCRA Subtitle C Landfills	NA		
5.5.18	Other Landfills	NA		
5.5.2	Land Treatment / Application Farming	NA		
5.5 3A	RCRA Subtitle C surface impoundments	NA		
5.5.3B	Other surface impoundments	NA		
5.5.4	Other Disposal	NA		

- 6.0 Transfers of the Toxic Chemical in Wastes to Off-site Locations
- 6.1 Discharges to Publicly Owned Treatment Works (POTWs)
- 6.1.A Total Quantity Transferred to POTWs and Basis of Estimate

6.1.A.1 Total Transfers: NA

6.1.A.2 Basis of Estimate:

6.1 B.1

POTW NAME NA

POIW Address:

City: County: State: Zip:

6.2 Transfers to Other Off-site Locations

6.2.1 Off-Site EPA Identification Number (RCRA ID No.) NA

Off-Site Location Name: NA

Off-site Address:

City. State: County: Province: Zip. Country:

Location under control of reporting facility or parent company:

A I otal I ransfers B. Basis of Estimate C Type of Waste Treatment/Disposal/

Recycling/Energy Recovery

I NA

7A On-Site Waste I reatment Methods & Efficiency

7A.1

a. General Waste Stream: NA

b Waste Treatment Method Sequence:

d Waste Treatment Efficiency:

7B On-site Energy Recovery Processes

1. <u>NA</u>

1 rifid: 46320KL DVS3000S

Facility Name: DOVER CHEMICAL HAMMOND WORKS

Facility Data Profile Date: 6/27/2008 FDP Notice No . FP08004052700

DCN: 13-07-205-55971-1 File Number: EX-08-00107282-4

Reporting Year: 2007

8.11 Additional Information Included: NQ

Form R continued

Chemical Name: POLYCHLORINATED ALKANES

_	1. NA				
8.0	Source Reduction & Recycling Activities * *Note: All values are in Pounds	Col. A Prior Year	Col. B Current Year	Col. C Following Year	Col. D Second Following Year
8.1a	Total on-site disposal to UIC Class I Wells RCRA Subtitle C landfills and other landfills	MA	NA	NA	NA
8.15	Total other on-site disposal or other releases	10	10	10	10
8.1c	Total off-site disposal to UTC Class (Wells, RCRA Subtitle C landfills and other landfills	NA	NA	NA	NA
8.1d	Total other off-site disposal or other releases	NA	NA	NA	NA
8.2	Quantity Used For Energy Recovery On-Site	NA	NA	NА	NA.
8.3	Quantity Used For Energy Recovery Off-Site	NA	NA	NA	NA
8.4	Quantity Recycled On-Site	NA	NA	NA	NA
8.3	Quantity Recycled Off-Site	NA	NA	NA	NA
86	Quantity Treated On-Site	NA	NA	NA	NA
8.7	Quantity Treated Off-Site	NA	NA	NA	NA
3 8	Quantity Released as a Result of Remedial. Catastrophic, or One Time Events	NA		4444	
3.9	Production Ratio or Activity Index	1			

Hartford, Steve (HWL, MSX)

From: Sent:

epacdxnode@csc.com

Wednesday, July 01, 2009 3:56 AM

To:

Hartford, Steve (HWL, MSX); Magee, Scott (HWL, MSX); Magee, Scott (HWL, MSX);

nodehelpdesk@csc.com

Subject:

EPCRA section 313 TRI submission has been CERTIFIED

Your EPCRA section 313 (TRI) submission has been PREPARED, CERTIFIED and SENT to U.S. EPA for the facility and chemical(s) shown below.

Please be aware that the State of INDIANA is participating in EPA's TRI State Data Exchange through the Environmental Information Exchange Network. This certified submission will be electronically forwarded to INDIANA, satisfying your obligation to report to both EPA and your state (INDIANA) .

Reference Transaction ID: _c9e1776d-1b0d-46db-9475-a6db6befb56c

Document Name: TRI000220090626151708STEVIEGS3000 Prepared by: steve hartford@doverchem.com

Date Prepared: Jun 26, 2009 3:17:27 PM Certifying Official:

Name: Scott Magee

Title: Operations Manager E-mail: smagee@doverchem.com

Date Certified and

Sent to EPA: Jul 1, 2009 4:55:23 AM

TRI Facility ID: 46320KLDVS3000S

Facility: DOVER CHEMICAL HAMMOND WORKS

3000 SHEFFIELD AVE HAMMOND INDIANA, 46327

Chemical Name	RY	CAS	Form	Revision	
Withdrawal	2000	100016		N	.,
Maleic anhydride	2008	108316	R	No	No
1,2,4-Trimethylbenzene	2008	95636	R	No	No
Hydrochloric acid (1995 and after "Aci	2008	7647010	R	No	No
Diethanolamine	2008	111422	R	No	No
Naphthalene	2008	91203	R	No	No
Methanol	2008	67561	R	No	No
n-Butyl alcohol	2008	71363	R	No	No
Chlorine	2008	7782505	R	No	No
Ethylbenzene	2008	100414	R	No	No
Xylene (mixed isomers)	2008	1330207	R	No	No
Cumene	2008	98828	R	No	No

You may wish to print a copy of this receipt and keep it for your records. Do NOT send this receipt to EPA.

United States Environmental Protection Agency Central Data Exchange

ATTACHMENT: SCC-09

1 rifid: 46320KL DVS3000S

Facility Name: DOVER CHEMICAL HAMMOND WORKS

Facility Data Profile Date: 6/27/2008 FDP Notice No: FP08004052700

Reporting Year: 2007

Form R Report

DCN: 13-07-205-55971-1 File Number: EX-08-00107282-4

Chemical Name: POLYCHLORINATED ALKANES

PART I:

1.0 Reporting Year: 2007

2.0 Trade Secret Information:

2.1 Trade Secret: NO

2.2 Sanitized: NO

3.0 Certification: Official Name: SCOTT MAGEE Title: OPERATIONS MANAGER Date Signed: 06-27-2008

4.2 This Report Contains Information for:

a. An entire facility: YES b. Part of a facility: NO c. A Federal Facility: NO. GOCO: NO.

4.5 NAICS Code(s):

325199 - Primary NAJCS

Withdrawal Reason

Revision Reason

PART II:

1.0. I oxic Chemical Identity:

1.1 CAS Number or Chemical Category Code: N583

1 2 Toxic Chemical or Chemical Category Name: POLYCHLORINATED ALKANES

1.3 Generic Chemical Name: NA

1.4 Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category:

1 2: 3: 4: 5: 6: 7. 8: 9: 10: 11: 12: 13: 14: 15: 16: 17:

2.0 Mixture Component Identity:

2.1 Generic Chemical Name Provided By Supplier: NA

3.0 Activities and Uses of the Toxic Chemical at the Facility:

If Produce or Import:

A Produce: YES

3.1 Manufacture the toxic chemical:

C For on-site use/processing: NO

D For sale/distribution: YES

B Import: NQ

E As a byproduct: NO

F As an impurity: NQ

3.2 Process the toxic chemical:

A As a reactant: NO

B As a formulation component: NO C As an article component: NO

D Repackaging: NO

E As an impurity. NO

3.3 Otherwise use the toxic chemical:

A As a chemical processing aid: NO

B As a manufacture aid: NO

C Ancillary or other use: NO

4.1 Maximum Amount of the Toxic Chemical On-Site at any Time During the Year. 04

Range from 10,000 To 99,999 (lb)

5.0 Quantity of the Toxic Chemical Entering Each Environmental Medium On-site

Air Emissions

A. Total Release B. Basis of Estimate

5.1 Fugitive Or Non-Point Air Emissions

Α

O-Other Approaches

5.2 Stack Or Point Air Emissions

Α

O-Other Approaches